

**DEPARTMENT
POLICY****MA**

The Breast and Cervical Cancer Prevention and Treatment Program (BCCPTP) is a Group 1 Medicaid category for women.

The Department of Health Health and Human Services/ Medical Services Administration (MSA) is responsible for establishing Medicaid under this category.

This category is **not** included on the priority lists in BEM 105 because MDHHS does **not** determine eligibility.

Eligibility is related to screening through a health department program called the Breast and Cervical Cancer Control Program.

**Breast and
Cervical Cancer
Control Program**

The Breast and Cervical Cancer Control Program is a health department program. The program may be more commonly known as the breast and cervical screening program. People seeking screening should refer to the name Breast and Cervical Cancer Control Program or the Breast and Cervical Screening Program.

Do not use the Medicaid category name to refer to the health department program, even though this program provides complete Medicaid coverage to the client.

Not all local health departments participate and there are sites enrolled in the program that are **not** local health departments.

A woman may request screening from a participating agency if her local health department does **not** participate.

More information about the health department program through the MDHHS website. Use the link on the MDHHS Authorized Internet Sites on the MDHHS-Net, or:

- Go to www.michigan.gov/mdch.
- Type bcccp in the Search box.
- That will give you a [link to the BCCCP page](#). Scroll down on that page for a link to the agency list.

The health department program has its own financial test for BCCCP. Income **cannot** exceed 250 percent of the federal poverty level. However, that determination is **not** an MDHHS responsibility.

BCCPTP APPLICATION AND ELIGIBILITY DETERMINATION

A simplified application form (DCH-1088, Medicaid Breast and Cervical Cancer Prevention and Treatment Program) has been created for this Medicaid category. It will be completed by a health department program coordinator or case manager and sent to MSA. MSA will register the application.

MSA will determine Medicaid eligibility for this Medicaid category at application (including any retro Medicaid eligibility), redetermination and when a change is reported.

BCCPTP is the only Medicaid category considered when the DCH-1088 is used.

BCCPTP AND OTHER MEDICAL ASSISTANCE

A woman who is already receiving Medicaid will **not** be approved for BCCPTP.

If a woman receiving BCCPTP is found eligible for FIP, notify MSA by calling the BCCPTP coordinator, Michele Barton at 517- 241-8164.

If a woman found eligible under BCCPTP is in Medicaid deductible status, MSA will end the Medicaid deductible status, open BCCPTP and notify the local office.

Note: An ex parte review (see glossary) is required before Medicaid closures when there is an actual or anticipated change, unless the change would result in closure due to ineligibility for all Medicaid. When possible, an ex parte review should begin at least 90 days before the anticipated change is expected to result in case closure. The review includes consideration of all Medicaid categories; see BAM 115 and 220.

**BCCPTP REPORTS
RECEIVED AT
LOCAL OFFICE**

The MDHHS local office in the county of residence will receive system generated reports (example, RD-093) which include BCCPTP recipients. The local office may also happen to receive change of address information for these recipients (example, woman is also receiving Food Assistance Program).

Send reports (or copies) for unit 78/specialist 88 and address changes to MSA.

Department of Health and Human Services
BCCPTP Coordinator
P.O. Box 30479
Lansing, MI 48909-7979

Telephone: 517- 241-8164

Fax: 517- 373-9305

BCCPTP HEARINGS

All hearing requests for BCCPTP applicants and recipients will be handled by MSA. If received by MDHHS, such hearing requests must be faxed, then mailed, to MSA's Administrative Tribunal; see Role of MDHHS Staff in BAM 600, Hearings.

**BCCPTP
NONFINANCIAL
ELIGIBILITY
FACTORS**

MSA determines eligibility.

The person must:

- Be female, and
- Be age 18 through 64, and
- Have been screened for breast or cervical cancer under the Centers for Disease Control and Prevention's Breast and Cervical Cancer Early Detection program established under Title XV of the Public Health Services Act, and

Note: This is a health department program called the Breast and Cervical Cancer Control Program.

- Have been diagnosed with breast or cervical cancer or a precancerous condition through that health department screening program, and

Note: A finding by a woman's doctor that she has breast or cervical cancer is not a substitute for a diagnosis through the screening program.

- **Not** have credible health insurance coverage [as the term is used under 42 U.S.C. 300gg(c)] that covers breast or cervical cancer or precancerous conditions.

Examples of credible health insurance are Medicare, Armed Forces insurance, group health plan, state health risk pool, medical care under a hospital or medical services policy or certificate, hospital or medical service plan or contract, and health maintenance organization contract.

Being in MA deductible status is not credible coverage. However, someone already receiving MA (coverage F or E) is **not** eligible under the BCCPTP category.

A woman who has Medicare **cannot** receive MA under BCCPTP because Medicare is credible health insurance. Therefore, a woman eligible under BEM 165, Medicare Savings Programs, **cannot** be BCCPTP eligible.

The woman must also meet the eligibility requirements in the following items:

- BEM 220, Residence.
- BEM 221, Identity.
- BEM 223, Social Security Number.
- BEM 225, Citizenship/Alien Status.
- BEM 257, Third Party Resource Liability.
- BEM 265, Institutional Status.

FINANCIAL ELIGIBILITY FACTORS

There are no financial eligibility factors for the BCCPTP Medicaid category.

Note: There is a financial test for the health department's Breast and Cervical Cancer Control Program. Income cannot exceed 250 percent of the federal poverty level. However, that determination is not an MDHHS responsibility.

LEGAL BASE

Social Security Act, Sections 1902(a)(10)(ii)(XVIII) and 1902(aa)
DCH Appropriations Act.
Deficit Reduction Act 2005, Social Security Act 1903 (x), PL 109-171